

# PRINTER RUSH

(PTO ASSISTANCE)

Application : 10/659 019

Examiner : Grant II

GAU : 2626

From : PRP

Location : (IDC) FMF FDC

Date : 10/21/05

Tracking #: EPM 10/659019 Week Date: 6/20/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>3/17/05</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>6/17/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Renumbered claim 3 (original claim 4)  
depends on renumbered claim 5 (original claim 5).  
Please advise.

Thank you.

[XRUSH] RESPONSE: Done

INITIALS: JR

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04